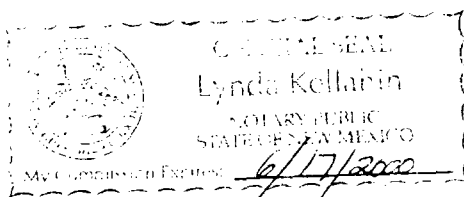


EXHIBIT "A"

SE/4 SECTION 1, T-20-S, R-38-E, NMPM, LEA COUNTY, NEW MEXICO

<u>UNLEASED MINERAL OWNERS:</u>	<u>MINERAL INTEREST</u>
Evans Oil and Gas, LLC. (No response) 1513 East Old Shakopee Road Bloomington, MN 55425-2440	0.0002705
John F. Corvino and Rita M. Corvino (No response) 2550 S. Kinsington Westchester, Il 60153	0.0000930
Edward F. Nicolin Address Unknown	0.0000145
Harry L. Jones (No response) 2315 Candy Lane Malabar, FL 32950-3563	0.0001163
Margaret Graham and Bankers Trust Company Address Unknown	0.0000290
Osprey Resources, Inc. (Terms OK, Lease form to onerous) • 1010 Lamar Street, Suite 1570 Houston, Texas 77002	0.0002981
Max R. Chudy (No response) 50 S. Meadow Orchard Park, NY 14127-2723	0.0002908
John L. Brady Address Unknown	0.0000290
Reba Lane Hatfield Address Unknown	0.0156250
Bessie Irene Lane Address Unknown	0.0156250
Joseph Kraus Address Unknown	0.0625000
Jack Reid (No Response) 2400 Summer Place Drive Irving, TX 75062-5318	0.0052083



KELLAHIN AND KELLAHIN

ATTORNEYS AT LAW

EL PATIO BUILDING

117 NORTH GUADALUPE

POST OFFICE BOX 2265

SANTA FE, NEW MEXICO 87504-2265

TELEPHONE (505) 982-4285
TELEFAX (505) 982-2047

W. THOMAS KELLAHIN*

*NEW MEXICO BOARD OF LEGAL SPECIALIZATION
RECOGNIZED SPECIALIST IN THE AREA OF
NATURAL RESOURCES-OIL AND GAS LAW

JASON KELLAHIN (RETIRED 1991)

April 7, 2000

TO: NOTICE OF THE HEARING OF THE FOLLOWING NEW
MEXICO OIL CONSERVATION DIVISION CASE:

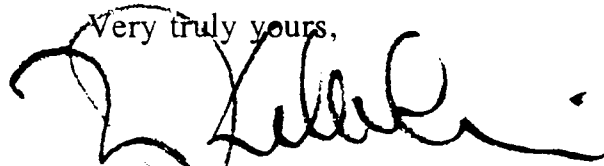
*Re: Application of Trilogy Operating, Inc.
for Compulsory Pooling, Lea County, New Mexico*

On behalf of Trilogy Operating, Inc., please find enclosed our application for an compulsory pooling for its Howser Well No. 1 which has been set for hearing on the New Mexico Oil Conservation Division Examiner's docket now scheduled for May 4, 2000. The hearing will be held at the Division hearing room located at 2040 South Pacheco, Santa Fe, New Mexico.

As an interest owner who may be affected by this application, we are notifying you of your right to appear at the hearing and participate in this case, including the right to present evidence either in support of or in opposition to the application. Failure to appear at the hearing may preclude you from any involvement in this case at a later date.

Pursuant to the Division's Memorandum 2-90, you are further notified that if you desire to appear in this case, then you are requested to file a Pre-Hearing Statement with the Division not later than 4:00 PM on Friday, April 28, 2000, with a copy delivered to the undersigned.

Very truly yours,



W. Thomas Kellahin

cc: BY CERTIFIED MAIL-RETURN RECEIPT REQUESTED
to all parties listed in application

EXHIBIT "A"

SE/4 SECTION 1, T-20-S, R-38-E, NMPM, LEA COUNTY, NEW MEXICOUNLEASED MINERAL OWNERSMINERAL INTEREST

Evans Oil and Gas, LLC. (No response)
1513 East Old Shakopee Road
Bloomington, MN 55425-2440

0.0002705

John F. Corvino and Rita M. Corvino (No response)
2550 S. Kinsington
Westchester, IL 60153

0.0000930

Edward F. Nicolin
Address Unknown

0.0000145

Harry L. Jones (No response)
2315 Candy Lane
Malabar, FL 32950-3563

0.0001163

Margaret Graham and Bankers Trust Company
Address Unknown

0.0000290

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• 1010 Lamar Street, Suite 1570
Houston, Texas 77002

0.0002981

Max R. Chudy (No response)
50 S. Meadow
Orchard Park, NY 14127-2723

0.0002908

John L. Brady
Address Unknown

0.0000290

Reba Lane Harfield
Address Unknown

0.0156250

Bessie Irene Lane
Address Unknown

0.0156250

Joseph Kraus
Address Unknown

0.0625000

Jack Reid (No Response)
2400 Summer Place Drive
Irving, TX 75062-5318

0.0052083

Trilogy
Howser Well #1
April 28, 2000
4/7/00

1. Article Addressed to:

Evans Oil & Gas LLC
1513 E. Old Shakopee Rd.
Bloomington, MN
55425-2440

2. Received By: (Print Name)

Signature (Addressee or Agent)

PS Form 3811, December 1994

102595-99-0223 Domestic Return Receipt

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

4a. Article Number

2 213 506 135

4b. Service Type

- ☐ Registered ☐ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

8. Addressee's Address (Only if requested and fee is paid)

SENDER:
Trilogy

Howser Well #1
April 28, 2000
4/7/00

1. Article Addressed to:

Harry L Jones
2315 Candy Lane
Malabar, FL 32950-3563

2. Received By: (Print Name)

Signature (Addressee or Agent)

PS Form 3811, December 1994

102595-99-0223 Domestic Return Receipt

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

4a. Article Number

2 213 506 137

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

8. Addressee's Address (Only if requested and fee is paid)

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery

C. Signature

- ☒ Agent
☐ Addressee

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below: ☐ No

Jack Reid
2400 Summer Place Drive
Irving, TX 75026-5318

3. Service Type

- ☐ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Copy from service label)

2 213 506 139

Domestic Return Receipt

PS Form 3811, July 1999

102595-99-M-1789

SE Trilogy

Howser Well #1
April 28, 2000
4/7/00

3. Article Addressed to:

John F Corvino & Rita M
Corvino
2550 S. Kensington
Westchester, IL 60153

5. Received By: (Print Name)

Signature (Addressee or Agent)

PS Form 3811, December 1994

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

4a. Article Number

2 213 506 136

4b. Service Type

- ☐ Registered ☐ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

8. Addressee's Address (Only if requested and fee is paid)

Thank you for using Return Receipt Service.

Trilogy
Howser Well #1
April 28, 2000
4/7/00

is your RETURN
indicated on the reverse side?

3. Article Addressed to:
Max R Chudy
50 S. Meadow
Orchard Park, NY
14127-2723

Certified

we can return this
if we does not
article number,
and the date

I also wish to receive the follow-
ing services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

4a. Article Number

2 213 506 138

4b. Service Type

- ☐ Registered ☐ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

4/10/00

8. Addressee's Address (Only if requested and
fee is paid)

5. Received By: (Print Name)

6. Signature (Addressee or Agent)

PS Form 3811, December 1994

102595-99 B-0223

Domestic Return Receipt

Thank you for using Return Receipt Service.